## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1,2003 P06697USOD

| CLAIMS AS FILED - PART I    |  |   |                                       |                             |              |                  |        | SMALL ENTITY |                        |        | OTHER THAN   |                        |  |
|-----------------------------|--|---|---------------------------------------|-----------------------------|--------------|------------------|--------|--------------|------------------------|--------|--------------|------------------------|--|
| ΓŦ                          | OTAL CLAIMS  | 2   | (Column 1)                            |                             | (Coli        | Column 2)        |        | TYPE         |                        | OR     | OR SMALL ENT |                        |  |
| TOTAL CLAIMS                |  |   | 25                                    |                             |              |                  | ,      | RATE         | FEE                    | ]      | RATE         | FEE                    |  |
| F                           | OR   |   | NUMBER                                | FILED                       | NUMBER EXTRA |                  |        | BASIC FE     | E 385.00               | OR     | BASIC FEE    | 770.00                 |  |
| T                           | OTAL CHARGE  | ABLE CLAIMS                               | 25 minus 20= *                        |                             |              |                  |        | XS 9=        | 45                     | -OR    | X\$18=       |                        |  |
| ⊩                           | DEPENDENT C  | <del></del>                               | 3 minus 3 = * @                       |                             |              |                  |        | X43=         |                        | OR     | X86=         |                        |  |
| М                           | JLTIPLE DEPE   | NDENT CLAIM P                             | RESENT                                |                             |              |                  |        | +145=        |                        | OR     | +290=        |                        |  |
| *                           | f the difference   | e in column 1 is                          | less than zero, enter "0" in column 2 |                             |              | column 2         |        | TOTAL        | 430                    | OR     | TOTAL        |                        |  |
| CLAIMS AS AMENDED - PART II |  |   |                                       |                             |              |                  |        |              |                        | _      | OTHER        | THAN                   |  |
|                             | · · · · · · · · · · · · · · · · · · ·  | (Column 2                                 |                                       |                             | (Column 3)   | · ·-             | SMALL  | ENTITY       | OR                     | SMALL  | ENTITY       |                        |  |
| AMENDMENT A                 |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUMB<br>PREVIO<br>PAID F    | ER<br>USLY   | PRESENT<br>EXTRA |        | RATE         | ADDI-<br>TIONAL<br>FEE |        | RATE         | ADDI-<br>TIONAL<br>FEE |  |
|                             | Total  | *   | Minus                                 | **                          |              | =                | X\$ 9= |              | OR                     | X\$18= |              |                        |  |
| AME                         | Independent  | <u>·                                 </u> |                                       |                             | =            |                  | X43=   |              | OR                     | X86=   |              |                        |  |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                       |                             |              |                  |        |              |                        | OR     | +290=        |                        |  |
|                             |  |   |                                       |                             |              |                  |        | +145=        |                        | 4 !    | TOTAL        |                        |  |
|                             |  | A   | DDIT. FEE                             |                             | OR ,         | ADDIT. FEE       |        |              |                        |        |              |                        |  |
| -                           |  | (Column 1)<br>CLAIMS                      |                                       | (Colum<br>HIGHE             |              | (Column 3)       | Г      |              | ADDI-                  | 7 r    |              | 4551                   |  |
| ENT B                       |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUMBI<br>PREVIOL<br>PAID F  | JSLY         | PRESENT<br>EXTRA |        | RATE         | TIONAL<br>FEE          |        | RATE         | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT                   | Total  | *   | Minus                                 | \$10                        |              | =                |        | X\$ 9=       |                        | OR     | X\$18=       |                        |  |
| AME                         | Independent  | *   | Minus                                 | ***                         |              | = .              | t      | X43=         |                        | OR     | X86=         |                        |  |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                       |                             |              |                  |        |              |                        | 1      | +290=        |                        |  |
|                             |  |   |                                       |                             |              |                  |        | +145=        |                        | OR     | TOTAL        |                        |  |
|                             |  |   |                                       |                             |              |                  |        | DDIT FEE     |                        | OR ,   | DDIT. FEEL   | <del></del>            |  |
| _                           |  | (Column 1)<br>CLAIMS                      |                                       | (Columnum)                  |              | (Column 3)       |        |              |                        | –      |              | ]                      |  |
| AMENDMENT C                 |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUMBE<br>PREVIOU<br>PAID FO | R            | PRESENT<br>EXTRA |        | RATE         | ADDI-<br>TIONAL<br>FEE |        | RATE         | ADDI-<br>TIONAL<br>FEE |  |
|                             | Total  | *   | Minus                                 | ##                          |              | =                |        | X\$ 9=       |                        | OR     | X\$18=       |                        |  |
| ME                          | Independent  |   | Minus                                 | ***                         |              | =                |        | X43=         |                        | ▎∴┟    | X86=         |                        |  |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                       |                             |              |                  |        | 7410-        |                        | OR     | 700-         |                        |  |
| * If                        | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |                                       |                             |              |                  |        |              |                        | OR     | +290=        | · .                    |  |
| ****                        | "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT |   |                                       |                             |              |                  |        |              |                        |        |              |                        |  |